

APPLICATION DATA SHEET

APPLICATION INFORMATION

Application Type:: REGULAR
Subject Matter:: UTILITY
CD-ROM or CD-R?:: NONE
Title:: METHOD, APPARATUS, AND SYSTEM
FOR DEMAND ASSIGNMENT IN A
COMMUNICATION NETWORK
Attorney Docket Number:: 244906US8
Request for Non-Publication?:: YES
Total Drawing Sheets:: 22

INVENTOR INFORMATION

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: U.S.A.
Status:: FULL CAPACITY
Given Name:: Joseph
Middle Name:: J.
Family Name:: BOONE
City of Residence:: FAIRFAX
State or Province of Residence:: VIRGINIA
Country of Residence:: U.S.A.
Street of Mailing Address:: 6121 Saddle Horn Drive
City of Mailing Address:: Fairfax
State or Province of Mailing Address:: Virginia
Country of Mailing Address:: U.S.A.
Postal or Zip Code of Mailing Address:: 22030

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: CHINA
Status:: FULL CAPACITY
Given Name:: Hao
Family Name:: CHENG
City of Residence:: HERNDON
State or Province of Residence:: VIRGINIA
Country of Residence:: U.S.A.
Street of Mailing Address:: 13602 Flintwood Place
City of Mailing Address:: Herndon
State or Province of Mailing Address:: Virginia
Country of Mailing Address:: U.S.A.
Postal or Zip Code of Mailing Address:: 20171

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: DENMARK
Status:: FULL CAPACITY
Given Name:: David
Middle Name:: B. S.
Family Name:: EDSBERG
City of Residence:: HERNDON
State or Province of Residence:: VIRGINIA
Country of Residence:: U.S.A.
Street of Mailing Address:: 12819 Briary River Terrace
City of Mailing Address:: Herndon
State or Province of Mailing Address:: Virginia
Country of Mailing Address:: U.S.A.
Postal or Zip Code of Mailing Address:: 20170

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: INDIA
Status:: FULL CAPACITY
Given Name:: Venugopal
Family Name:: EYYUNNI
City of Residence:: CENTREVILLE
State or Province of Residence:: VIRGINIA
Country of Residence:: U.S.A.
Street of Mailing Address:: 6565 Creek Run Drive
City of Mailing Address:: Centreville
State or Province of Mailing Address:: Virginia
Country of Mailing Address:: U.S.A.
Postal or Zip Code of Mailing Address:: 20121

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: U.S.A.
Status:: FULL CAPACITY
Given Name:: Jason
Middle Name:: B.
Family Name:: MAIORANA
City of Residence:: VIENNA
State or Province of Residence:: VIRGINIA
Country of Residence:: U.S.A.
Street of Mailing Address:: 9558 Pine Cluster Circle
City of Mailing Address:: Vienna
State or Province of Mailing Address:: Virginia
Country of Mailing Address:: U.S.A.
Postal or Zip Code of Mailing Address:: 22181

CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 22850

REPRESENTATIVE INFORMATION

Representative Customer Number:: 22850

ASSIGNMENT INFORMATION

Assignee Name:: iDirect Incorporated

Street of Mailing Address:: 10803 Parkridge Boulevard
City of Mailing Address:: Reston
State or Province of Mailing Address:: Virginia
Country of Mailing Address:: U.S.A.
Postal or Zip Code of Mailing Address:: 20191